AO 239 (01/09) Application to Proceed in District Court Without Prepaying Fees or Costs (Long Form)

Church OF UNITED STATE	ES DISTRICT COURT for the
The Cost	)
SCC Sic Sure  Defendant/Respondent	Civil Action No. 3LV2495 DWF/55C

## APPLICATION TO PROCEED IN DISTRICT COURT WITHOUT PREPAYING FEES OR COSTS (Long Form)

## Affidavit in Support of the Application **Instructions** I am a plaintiff or petitioner in this case and declare Complete all questions in this application and then sign it. that I am unable to pay the costs of these proceedings Do not leave any blanks: if the answer to a question is "0," and that I am entitled to the relief requested. I declare "none," or "not applicable (N/A)," write that response. If under penalty of perjury that the information below is you need more space to answer a question or to explain your true and understand that a false statement may result in answer, attach a separate sheet of paper identified with your a dismissal of my claims. name, your case's docket number, and the question number. Signed: Date:

1. For both you and your spouse estimate the average amount of money received from each of the following sources during the past 12 months. Adjust any amount that was received weekly, biweekly, quarterly, semiannually, or annually to show the monthly rate. Use gross amounts, that is, amounts before any deductions for taxes or otherwise.

Income source	Average	e monthly	income	Income am	ount expected
	amount	during tl	ie past 12	next	month
		months			
	You		Spouse	You	Spouse
Employment	\$ (	\$		3	\$
Self-employment	\$	\$		\$ (	187
Income from real property (such as rental income)	*	No.		\$	10
Interest and dividends	\$	\$		\$	\$
Gifts	\$	X (s)	/	\$	8
Alimony	\$ 7	8	100	\$ \	\$
Child support	\$	\$	VIE	\$ \( \)	\$ /
	20		2>1		SCANNED
	8			S	SEP 1 2 2013
			U ·	U.S. [	DISTRICT COUR ME
		1			$\nu$

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Retirement (such as social security, pensions, annuities, insurance)	\$ 5	8	20	\$ 1 6	\$ / 2		
Disability (such as social security, insurance payments)	\$	S		\$ (1)	\$ 100	CO	,
Unemployment payments	\$	\$		\$ 1	\$ ~	二	
Public-assistance (such as welfare)	\$	6		\$	\$	SK	フ ノ
Other (specify):	\$	\$		\$ COV	\$	The t	A
Total monthly income:	\$ 0.0	0 \$	0.00	\$ 0.00	\$	0.00	

2. List your employment history for the past two years, most recent employer first. (Gross monthly pay is before taxes or other deductions.)

Employer	Address	Dates of employment	Gross monthly pay
56		2 × × (   2 5/10)	\$
		MO WOVE	\$

3. List your spouse's employment history for the past two years, most recent employer first. (Gross monthly pay is before taxes or other deductions.)

Employer	Address	Dates of	employment	Gross monthly pay
		50	05	s s

Below, state any money you or your spouse have in bank accounts or in any other financial institution.

Financial institution	Type of account	Amount you have	Amount your spouse has
5	10	s Sa	
	TICNO	\$ 71	\$
	1170191	ps. US	s I Plan

If you are a prisoner, you must attach a statement certified by the appropriate institutional officer showing all receipts, expenditures, and balances during the last six months in your institutional accounts. If you have multiple accounts, perhaps because you have been in multiple institutions, attach one certified statement of each account.

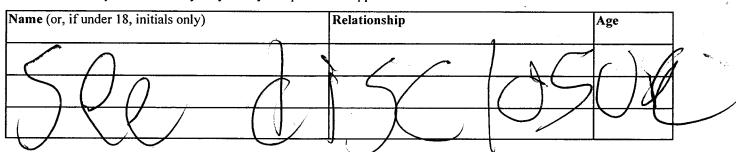
5. List the assets, and their values, which you own or your spouse owns. Do not list clothing and ordinary household furnishings.

Assets owned by yo	u or your spouse
Home (Value)	\$ 500
Other real estate (Value)	8 1 1 8
Motor vehicle #1 (Value)	s (1) Dyne
Make and year:	
Model:	
Registration #:	
Motor vehicle #2 (Value)	5 Ce Cosy
Make and year:	
Model:	
Registration #:	
Other assets (Value)	\$ 500
Other assets (Value)	\$ d 802m

6. State every person, business, or organization owing you or your spouse money, and the amount owed.

Person owing you or your spouse money	Amount owed to you	Amount owed to your spouse
	\$ ~	s
	8 (	(s))()(+)
		\$
7	an Liou on Lour anough for our and	

7. State the persons who rely on you or your spouse for support.



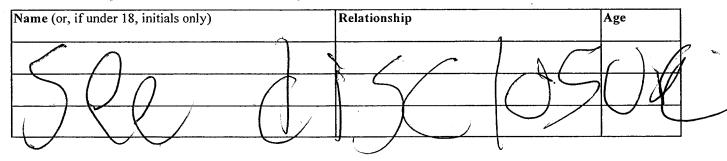
List the assets, and their values, which you own or your spouse owns. Do not list clothing and ordinary 5. household furnishings.

Assets owner	d by you or your spouse
Home (Value)	\$ 500
Other real estate (Value)	8 1 1 8
Motor vehicle #1 (Value)	s (1) Come
Make and year:	
Model:	
Registration #:	
Motor vehicle #2 (Value)	5Ce Ciscos
Make and year:	
Model:	
Registration #:	
Other assets (Value)	\$ 50 C 11
Other assets (Value)	s de Stram

6. State every person, business, or organization owing you or your spouse money, and the amount owed.

Person owing you or your spouse money	Amount owed to you	Amount owed to your spouse
	\$ \	s P M
	8 ( )	(s)
	s	s
7 State the persons who rely o	on you or your spouse for support.	

State the persons who rely on you or your spouse for support.



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AO 239	(01/09) Application to Floceed in District Court Without Frepaying Fees of Costs (2016) Fermi				*	
Regula stateme	ar expenses for operation of business, profession, or farm (attach detailed nt)	\$		Q	3	
Other	(specify):	\$	à	13	\$ 5	THE
	Total monthly expenses:	\$		0.00	\$	0.00
9.	Do you expect any major changes to your monthly income or expenses on next 12 months?	or in y	our ass	ets or li	abilities	during the
	☐ Yes No If yes, describe on an attached sheet.					
10.	Have you paid — or will you be paying — an attorney any money for se including the completion of this form? ☐ Yes No	ervices	s in con	nection	with thi	s case,
	If yes, how much? \$					
11.	Have you paid — or will you be paying — anyone other than an attorner for services in connection with this case, including the completion of this				a typist) i	
	If yes, how much? \$				, <b>,</b>	
12.	Provide any other information that will help explain why you cannot pay	y the c	osts of	these p	roceedin	gs.
13.	Identify the city and state of your legal residence.					
	Your daytime phone number:	<b>م</b> د	_			
	Your age: Your years of schooling: D13Clo	50	DE	_		
	EJM	·				
	46-226 78	5	7			

Civil Action No.

## PROOF OF SERVICE

This summons for (name o	f individual and title, if any)	Sep	Visclo	SUP	
ceived by me on (date)	•	<u> </u>			
personally served the	symmons on the individual at	(place) On (date)	0 5 (	eth ; or	St
☐ I left the summons at t	he individual's residence or us	sual place of abode v	vith (name)		
	, a person	of suitable age and	discretion who re	esides there,	
on (date)	, and mailed a copy to the	ne individual's last k	nown address; or	r	
☐ I served the summons	on (name of individual)			, w	ho is
designated by law to acco	ept service of process on behal				
		on (date)		; or	
☐ I returned the summon	is unexecuted because				; or
☐ Other (specify):					
My fees are \$	for travel and \$  reperjury that this information i		es, for a total of \$	0.00	
My fees are \$		is true.  ACL S  Server  UCh ST	es, for a total of \$  What is signature  The signature and title	0.00 (OS) C105	- - 5